

01-25-08

Atty. Dkt. No. 075977-0125



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: RUBEN et al.

Title: NOVEL PROTEIN  
EXPRESSED IN BRAIN  
(As Amended)

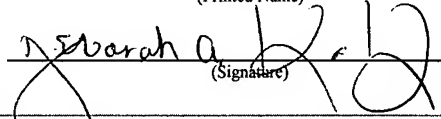
Appl. No.: 10/800,834

Filing Date: 03/16/2004

Examiner: Hamud, Fozia M.

Art Unit: 1647

Confirmation No.: 2119

<b>CERTIFICATE OF EXPRESS MAILING</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
EM 113864008 US (Express Mail Label Number)	January 24, 2008 (Date of Deposit)
Deborah A. Kocorowski (Printed Name)	
 (Signature)	

Mail Stop **AMENDMENT**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT AND REPLY TRANSMITTAL**

Transmitted herewith is an Amendment and Reply in the above-referenced patent application.

Enclosed please find:

[ X ] Amendment and Reply under 37 C.F.R. § 1.111 (17 pages).

[ X ] The fee required for additional claims is calculated below:

01/25/2008 SDIRETA1 00000019 10800834

01 FC:1253

1050.00 OP

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	28	-	26	=	2	x	\$50.00	=	\$100.00
Independent Claims:	6	-	4	=	2	x	\$210.00	=	\$420.00
First presentation of any Multiple Dependent Claims:		+					\$370.00	=	\$0.00
CLAIMS FEE TOTAL									= \$520.00

☒ The Applicants hereby petition for an extension of time under 37 C.F.R. § 1.136(a) for the total number of months checked below:

<input type="checkbox"/> Extension for response filed within the first month:	\$120.00	\$0.00
<input type="checkbox"/> Extension for response filed within the second month:	\$460.00	\$0.00
<input checked="" type="checkbox"/> Extension for response filed within the third month:	\$1,050.00	\$1,050.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,640.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,230.00	\$0.00
EXTENSION FEE TOTAL:		\$1,050.00
<input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. § 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$1,570.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):		\$0.00
Extension Fees Previously Paid:		\$0.00
TOTAL FEE:		\$1,570.00

A credit card payment form in the amount of \$1,570.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

If any extensions of time are needed for timely acceptance of papers submitted herewith, the Applicants hereby petition for such extension under 37 C.F.R. § 1.136 and authorize payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date January 24, 2008

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for Michele M. Simkin  
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